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**JUL 27 2005**

**To:** Examiner Dana D. Greene**From:** Steven L. Nichols**Fax:** (571) 273-8300**Pages:** 16 including coversheet**Phone:****Date:** July 27, 2005**Re:** Amendment - Application No. 10/731,551

☒ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

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3. Transmittal Letter for Response/Amendment (1 page)
4. Duplicate Copy of Transmittal Letter for Response/Amendment (1 page)
5. Amendment (14 pages)

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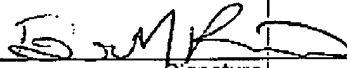
Application No.: 10/731,551

Attorney Docket No.: AB-308U

**Certificate of Transmission**

I hereby certify that this correspondence is being facsimile transmitted to Examiner Dana D. Greene via the USPTO central facsimile number, (571) 273-8300.

on July 27, 2005  
Date



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JUL 27 2005

PAGE 03/16

AB-308U

Serial No.: 10/731,551

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re Patent Application:** Todd K. Whitehurst et al.

**Application No.:** 10/731,551

**Filed:** December 8, 2003

**Title:** Fully Implantable Miniature Neurostimulation  
for Intercostal Nerve as a Therapy for Angina  
Pectoris"

**Examiner:** GREENE, Dana D.

**Group Art Unit:** 3762

**Confirmation No.:** 4571

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT**

**Sir:**

Transmitted herewith is/are the following in the above-identified application:

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Response/Amendment          | <input type="checkbox"/> Petition to extend time to respond |
| <input checked="" type="checkbox"/> New fee as calculated below | <input type="checkbox"/> Supplemental Declaration           |
| <input type="checkbox"/> No additional fee                      | <input type="checkbox"/> Other: _____                       |

CLAIMS AS AMENDED BY A LARGE ENTITY						
FOR	CLAIMS REMAINING AFTER AMENDMENT	NUMBER EXTRA	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	28	MINUS	20	= 8	X \$50.00	\$400.00
INDEP. CLAIMS	4	MINUS	3	= 1	X \$200.00	\$200.00
[ ] FIRST PRESENTATION OF A MULTIPLE DEPENDANT CLAIM					+ \$360.00	\$
EXTENSION FEE	[ ] 1ST MONTH \$120.00	[ ] 2ND MONTH \$450.00	[ ] 3RD MONTH \$1020.00	[ ] 4TH MONTH \$1590.00		\$0.00
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$600.00

Please charge **\$600.00** to Deposit Account **18-0013/40328-0050**. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account **18-0013/40328-0050** pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account **18-0013/40328-0050** under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate of this sheet is enclosed.

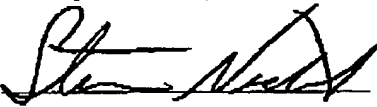
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Number of pages transmitted: **16**

Signature:

  
Brian J. Riddle

Respectfully submitted,

By:   
**Steven L. Nichols** (Reg. No.: 40,326)  
Attorney/Agent for Applicant(s)  
Telephone No.: (801) 572-8066  
Date: July 27, 2005

JUL 27 2005

AB-308U

10/731,551

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Patent Application of

Todd K. Whitehurst et al.

Application No. 10/731,551

Filed: December 8, 2003

For: Fully Implantable Miniature  
Neurostimulator for Intercostal  
Nerve Stimulation as a Therapy  
for Angina Pectoris

Group Art Unit: 3762

Examiner: Dana D. Greene

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Commissioner:

In response to the non-final Official Action mailed on April 28, 2005, please amend  
the above-identified application as follows:

07/28/2005 TL0111 00000019 180013 10731551  
01 FC:1201 200.00 DA  
02 FC:1202 400.00 DA